County: Sumter

Facility Type: Adult Day Care

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Administrator/Phone
Licensee

Licensed Unit

20

MAGNOLIA ADULT DAY CENTER LLC ADC-0285 / 10/31/2009

20 S MAGNOLIA ST Sumter / Limited Liability

SUMTER, SC 29150 142 PERKINS AVE GREENE, CARL PH#: 803-778-1086 SUMTER, SC 29150

Fac. Cont. Email:No Fac Cont. email on record MAGNOLIA ADULT DAY CENTER LLC

Number of Participants 20

SUMTER ACTIVE DAY CENTER ADC-0144 / 05/31/2009 52

930 OSWEGO RD Sumter / Corporation

SUMTER, SC 29153 930 OSWEGO RD

WEBB-PRINCE, CAROLYN PH#: 803-775-4281 SUMTER, SC 29153

Fac. Cont. Email: CWEBBPRINCE@ACTIVEDAY.COM ACSR INC
Number of Participants 52

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed: 2 Number Licensed Units 72

Facility Type: Ambulatory Surgery

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone

Licensed Unit Licensee

WESMARK AMBULATORY SURGERY CENTER ASF-0081 / 03/31/2010 420 W WESMARK BLVD Sumter / Ltd. Liability SUMTER, SC 29150 410 W WESMARK BLVD

CHAMPION, STEPHANIE PH#: 803-905-5590 SUMTER, SC 29150

Fac. Cont. Email:PROYAL@SUMTERUROLOGICAL.COM WESMARK AMBULATORY SURGERY CENTER LLC

> 2 Procedure Rooms 4 Endoscopy Rooms Operating Rooms

Totals For Facility/License Type	Ambulatory	Surgery			
Number of Activities/Facilities lice	ensed:	1 Number	Licensed 1	Units	6

County: Sumter

Facility Type: Body Piercing

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone Licensed Unit Licensee HEAT STREET-SUMTER BP-0155 / 06/30/2009 1 1169 BROAD ST Sumter / Ltd. Liability SUMTER, SC 29150 1169 BROAD ST MITCHELL, LLOYD PH#: 803-905-5623 SUMTER, SC 29150 Fac. Cont. Email:LLOYD@HEATSTREET.COM HEAT STREET LLC KNOTTY HEADZ BODY PIERCING-SUMTER BP-0214 / 12/31/2009 1084 B BROAD ST Sumter / Ltd. Liability SUMTER, SC 29150-2541 FORD, BANYON PH#: 803-790-7029 Fac. Cont. Email: No Fac Cont. email on record KNOTTY HEADZ ENTERPRISES LLC

Totals For Facility/License Type Body Piercing		
Number of Activities/Facilities licensed: 2	Number Licensed Units	2

Facility Type: Community Residential Care Fa	Facility
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Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
ANGELIC'S PLACE	CRC-1400 / 09/30/2009	11
903 W BARTLETTE ST	Sumter / Ltd. Liability	
SUMTER, SC 29150	903 W BARTLETTE ST	
GREENE, SHIRLEY H PH#: 803-775-1404	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	ANGELIC'S PLACE LLC	
Certifications:None		
ANNOINTED RESIDENTIAL CARE	CRC-1435 / 03/31/2010	5
551 S SUMTER ST	Sumter / Partnership	
SUMTER, SC 29150	551 S SUMTER ST	
BRADLEY, DAISY E PH#: 803-840-1704	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	COREY T WRIGHT & DAISY BRADLEY	
Certifications:None		
CARRIAGE HOUSE OF SUMTER INC	CRC-0997 / 03/31/2010	60
431 N MAIN ST	Sumter / Corporation	
SUMTER, SC 29150-3300	PO BOX 3300	
GOLDEN, IDA M PH#: 803-773-0965	SUMTER, SC 29151-3300	
Fac. Cont. Email:No Fac Cont. email on record	CARRIAGE HOUSE OF SUMTER INC	
Certifications:None		
COMMUNITY RESIDENTIAL CARE FACILITY	CRC-0613 / 12/31/2009	20
703 BROAD ST	Sumter / Non-Profit Corporation	
SUMTER, SC 29150-6051	PO BOX 3818	
BRADLEY, DAISY E PH#: 803-773-6525	SUMTER, SC 29151	
Fac. Cont. Email:No Fac Cont. email on record	COMMUNITY INTERMEDIATE CARE FACILITY I	NC
Certifications:Alzheimer Care		
COVENANT PLACE	CRC-0758 / 03/31/2010	70
2825 CARTER RD	Sumter / Non-Profit Corporation	
SUMTER, SC 29150	2825 CARTER ST	
LINDER, RISLEY E PH#: 803-469-7007	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	COVENANT PLACE OF SUMTER INC	
Certifications: None		
FAMILY RESIDENTIAL CARE HOME I	CRC-1233 / 02/28/2010	5
21 EDWARDS ST	Sumter / Sole Proprietorship	
SUMTER, SC 29150	PO BOX 7658	
WALTERS, MICHAEL A PH#: 803-775-9555	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	MICHAEL A WALTERS	
Certifications:Alzheimer Care		

Facility Type: Community Residential	l Care	Facility
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Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
FAMILY RESIDENTIAL CARE HOME II	CRC-1277 / 06/30/2009	5
23 EDWARDS ST	Sumter / Sole Proprietorship	
SUMTER, SC 29150	PO BOX 7658	
WALTERS, MICHAEL A PH#: 803-775-9555	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	MICHAEL A WALTERS	
Certifications:Alzheimer Care		
FLORA'S RESIDENTIAL CARE FACILITY	CRC-1293 / 04/30/2010	5
906 S HARVIN ST	Sumter / Sole Proprietorship	
SUMTER, SC 29150	PO BOX 2980	
YORK-HERRIOTT, LUCINDA PH#: 803-773-6882	SUMTER, SC 29151	
Fac. Cont. Email:No Fac Cont. email on record	LUCINDA YORK-HERRIOTT	
Certifications:None		
GREENE'S RESIDENTIAL CARE FACILITY	CRC-0665 / 01/31/2010	21
23 KENDRICK ST	Sumter / Partnership	
SUMTER, SC 29150	142 PERKINS AVE	
GREENE, CARL PH#: 803-778-2780	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	CARL AND SHIRLEY GREENE	
Certifications:None		
GREENE'S RESIDENTIAL CARE II	CRC-1126 / 10/31/2009	12
28 S MAGNOLIA ST	Sumter / Sole Proprietorship	
SUMTER, SC 29150	142 PERKINS AVE	
GREENE, CARL PH#: 803-778-2780	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	CARL GREENE	
Certifications:None		
HERRIOTT'S RESIDENTIAL CARE FACILITY	CRC-1013 / 06/30/2009	14
114 LIME LN	Sumter / Partnership	
SUMTER, SC 29150	114 LIME LN	
DAVIS, CATHERINE PH#: 803-773-6882	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	JOHN & LUCINDA HERRIOTT	
Certifications:Alzheimer Care		
MCELVEEN MANOR INC	CRC-0988 / 03/31/2010	100
2065 MCCRAY'S MILL RD	Sumter / Corporation	
SUMTER, SC 29154-9645	2065 MCCRAY'S MILL RD	
MCELVEEN, MICHELE S PH#: 803-778-9690	SUMTER, SC 29154-9645	
Fac. Cont. Email:MCELVEENMANOR@SC.RR.COM	MCELVEEN MANOR INC	
Certifications:Alzheimer Unit, Alzheimers Care		

County: Sumter

WILLIE'S RESIDENTIAL CARE

Certifications:None

WILLIAMS, TRACEY L PH#: 803-775-6355

Fac. Cont. Email:TRACEW90@AOL.COM

244 MURPHY ST

SUMTER, SC 29150

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
MORNINGSIDE OF SUMTER	CRC-1079 / 04/30/2009	55
2500 LIN-DO CT	Sumter / Limited Liability Limited	d Partnership
SUMTER, SC 29150-0000	2500 LIN-DO CT	
WATFORD, TONYA D PH#: 803-469-4490	SUMTER, SC 29150	
Fac. Cont. Email:TWATFORD@5SQC.COM	MORNINGSIDE OF SOUTH CAROLINA L P	
Certifications:None		
STERLING HOUSE OF SUMTER	CRC-1312 / 12/31/2009	52
1180 WILSON HALL RD	Sumter / Corporation	
SUMTER, SC 29150	1180 WILSON HALL RD	
HAM-BROWN, ELIZABETH PH#: 803-469-4508	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	BROOKDALE SENIOR LIVING COMMUNITIES IN	NC
Certifications:Alzheimer Care		
TRINITY PLACE	CRC-1442 / 05/31/2009	79
1267 N MAIN ST	Sumter / Non-Profit Corporation	
SUMTER, SC 29150-0000	PO BOX 296	
PICKENS, TIANITA PH#: 803-774-5700	SUMTER, SC 29151	
Fac. Cont. Email:No Fac Cont. email on record	EMPOWERED PERSONAL CARE HOME HEALTH AI	LLIANCE INC
Certifications:None		
WALTERS BROTHERS RESIDENTIAL CARE FACILITY	CRC-1080 / 04/30/2010	20
110 GEDDINGS RD	Sumter / Sole Proprietorship	
SUMTER, SC 29150	3300 OLD MANNING RD	
WALTERS, JOHNNIE L PH#: 803-506-2743	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	JOHNNIE L WALTERS	
Certifications:Alzheimer Care		
WILLIE S II RCH	CRC-1485 / 12/31/2009	5
46 WILSON ST	Sumter / Sole Proprietorship	
SUMTER, SC 29150		
WILLIAMS, TRACY L PH#: 803-481-7027		
Fac. Cont. Email:TACEW90@AOL.COM	WILLIAMS, TRACY L	
Certifications:None		

CRC-1262 / 03/31/2010

SUMTER, SC 29151-3311

PO BOX 3311

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TRACY L WILLIAMS

Sumter / Sole Proprietorship

County: Sumter

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

Totals For Facility/License Type Co	mmunity Residential Care Facility
Number of Activities/Facilities license	ed: 18 Number Licensed Units 544

County: Sumter

Facility Type: Habilitation R15

Fac. Cont. Email: AMCLEAN@DDSN.SC.GOV

License Nbr/Expiration Date Facility Name Location Street County/Ownership Typ Mailing/Billing Addres Location City, State Administrator/Phone Licensed Unit Licensee ATKINSON EAST COMMUNITY RESIDENCE MR15-0179 / 06/30/2009 9 13 KENDRICK ST Sumter / State SUMTER, SC 29150-5224 PO BOX 4706 BOONE, CARRIE D PH#: 803-775-9466 COLUMBIA, SC 29240-4706 Fac. Cont. Email: AMCLEAN@DDSN.SC.GOV SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS ATKINSON WEST COMMUNITY RESIDENCE MR15-0180 / 06/30/2009 9 162 COMMUNITY ST Sumter / State SUMTER, SC 29150-3316 PO BOX 4706 PALMER, MYRA PH#: 803-775-3550 COLUMBIA, SC 29240-4706 Fac. Cont. Email: AMCLEAN@DDSN.SC.GOV SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS THOMAS DRIVE COMMUNITY RESIDENCE MR15-0073 / 05/31/2009 4 THOMAS DR Sumter / State SUMTER, SC 29150-2428 PO BOX 4706 COLUMBIA, SC 29240-4706 BOONE, CARRIE D PH#: 803-775-9466

Totals For Facility/License Type Habilitation R15	
Number of Activities/Facilities licensed: 3 Number Licensed Units	26

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SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Division of Health Licensing

County: Sumter

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Sumter / Non-Profit Corporation

HHA-0175 / 02/28/2010

115 N SUMTER ST STE 410

SUMTER, SC 29150-4969

TUOMEY

Licensed Unit

TUOMEY HOME HEALTH

115 N SUMTER ST STE 410 SUMTER, SC 29150-4969

License Restrictions

MCMASTER, KATHY P PH#: 803-773-4663

Fac. Cont. Email:KATHY.MCMASTER@TUOMEY.COM

Counties Served Clarendon, Lee, Sumter

Physical Therapy Y Speech Therapy: N Occupational Therapy N Med. Social Services Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N

Other:

Totals For Facility/License Type Home Health		
Number of Activities/Facilities licensed: 1	Number Licensed Units	3

County: Sumter

Facility Type: Hospice Program

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone Licensed Unit Licensee CAROLINA HOSPICE OF SUMTER HPC-0144 / 09/30/2009 3 447 N MAIN Sumter / Limited Liability SUMTER, SC 29151 PO BOX 7357 JOHNSON, SHIRON PH#: 803-467-1263 SUMTER, SC 29151 CAROLINA HOSPICE LLC Fac. Cont. Email:GEE-TAX@HOTMAIL.COM Counties Served Clarendon, Lee, Sumter TUOMEY HOSPICE HPC-0020 / 05/31/2009 3 115 N SUMTER ST STE 410 Sumter / Non-Profit Corporation SUMTER, SC 29150-4969 115 N SUMTER ST STE 410 MCMASTER, KATHY P PH#: 803-773-4663 SUMTER, SC 29150-4969 Fac. Cont. Email: KATHY. MCMASTER@TUOMEY. COM TUOMEY Counties Served Clarendon, Lee, Sumter

Totals For Facility/License Type Hospice Program		
Number of Activities/Facilities licensed: 2	Number Licensed Units	6

Division of Health Licensing

County: Sumter

Facility Type: Hospital or Institutional General Infirmary

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Mailing/Billing Addres Location City, State

Administrator/Phone Licensed Unit Licensee

TUOMEY HTL-0096 / 07/31/2009 283

129 N WASHINGTON ST Sumter / Non-Profit Corporation

SUMTER, SC 29150 129 N WASHINGTON ST COX, JAY PH#: 803-774-9000 SUMTER, SC 29150

TUOMEY Fac. Cont. Email:No Fac Cont. email on record

Licensed Beds: General: Psychistric: Substance Abuse 283 0 Rehab: 0 0

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Other Beds NICU: 0 Neonatal Special Care Certifications: Abortions, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: Number Licensed Units

County: Sumter

Facility	Type:	Nursing	Home
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Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Mailing/Billing Addres Location City, State Licensed Unit Administrator/Phone Licensee COVENANT PLACE NURSING CENTER NCF-0632 / 05/31/2009 2825 CARTER RD Sumter / Non-Profit Corporation 2825 CARTER RD SUMTER, SC 29150 SUMTER, SC 29150 RICHARDSON, JACQUE W PH#: 803-469-7007 Fac. Cont. Email:JRICHARDSON@COVENANTPLACE.ORG COVENANT PLACE OF SUMTER INC Licensed Beds Nursing Home 0 Institutional Nursing Home 44 Certifications: Alzheimer Unit, Alzheimers Care HOPEWELL HEALTH CARE CENTER NCF-0745 / 10/31/2009 96 1761 PINEWOOD RD Sumter / Corporation SUMTER, SC 29154-0000 1761 PINEWOOD RD BURNS, ROBERT W PH#: SUMTER, SC 29154-9056 HP/HOPEWELL INC Fac. Cont. Email: No Fac Cont. email on record Licensed Beds Nursing Home 96 Institutional Nursing Home Certifications:None NHC HEALTHCARE SUMTER NCF-0471 / 01/31/2010 138 1018 N GUIGNARD DR Sumter / Corporation SUMTER, SC 29150 PO BOX 1524 CROTTS, JEANIE S PH#: 803-773-5567 SUMTER, SC 29151-1524 Fac. Cont. Email: JCROTTS@NHCSUMTER.COM NATIONAL HEALTH CORPORATION Licensed Beds Nursing Home 138 Institutional Nursing Home Certifications: None SUMTER EAST HEALTH AND REHABILITATION CENTER NCF-0919 / 09/30/2009 176

880 CAROLINA AVE Sumter / Ltd. Liability SUMTER, SC 29150 880 CAROLINA AVE HATTON, BRYAN C PH#: 803-775-5394 SUMTER, SC 29150 Fac. Cont. Email:BCHATTON@SAVASC.COM SSC SUMTER EAST OPERATING COMPANY L L C

Licensed Beds Nursing Home 176 Institutional Nursing Home

Certifications:None

TUOMEY SUBACUTE SKILLED CARE PROGRAM

NCF-0698 / 02/28/2010 129 N WASHINGTON ST Sumter / Non-Profit Corporation SUMTER 29150 129 N WASHINGTON ST MCMASTER, KATHY P PH#: 803-774-9000 SUMTER, SC 29150 Fac. Cont. Email: KATHYMCMASTER@TUOMEY.COM

Licensed Beds Nursing Home 18 Institutional Nursing Home

Certifications:None

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed: 5	Number Licensed Units	472

County: Sumter

Facility Type: PSAD Inpatient

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Administrator/Phone
Licensee

Administrator/Phone Licensee Licensed Unit
FREEDOM HOUSE ITP-0004 / 05/31/2009 10

221 W LIBERTY ST Sumter / County

SUMTER, SC 29150-5115 PO BOX 39

BIRD, WAYNE O PH#: 803-775-9012 SUMTER, SC 29151

Fac. Cont. Email: WBIRD@SUMTERCCADA.ORG SUMTER COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE

Licensed Beds Medical Detox 0 Social Detox: 6 Res. Trestment Program 4

LIBERTY HOUSE ITP-0003 / 05/31/2009 5

441 N MAIN ST Sumter / County SUMTER, SC 29150-5115 PO BOX 39

BIRD, WAYNE O PH#: 803-773-1013 SUMTER, SC 29151

Fac. Cont. Email: WWBIRD@SUMTERCCADA.ORG SUMTER COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE

Licensed Beds Medical Detox 0 Social Detox: 0 Res. Trestment Program 5

Totals For Facility/License Type PSAD Inpatient

Number of Activities/Facilities licensed: 2 Number Licensed Units 15

County: Sumter

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

SUMTER COUNTY COMMISSION ON ALCOHOL & DRUG ABUSE

115 N HARVIN ST

SUMTER, SC 29150 BRYAN, CARMELA P PH#: 803-775-6815

Fac. Cont. Email:WWBIRD@SUMTERCCADA.ORG

OTP-0010 / 07/31/2009

Sumter / County

PO BOX 39

SUMTER, SC 29151

SUMTER COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE

Certifications:None

Totals For Facility/License	Type	PSAD	Outpatient
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Number of Activities/Facilities licensed:

Number Licensed Units

Division of Health Licensing

County: Sumter

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone

License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

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SUMTER DIALYSIS CENTER

615 W WESMARK BLVD SUMTER, SC 29150-1900

BROWN, SABRA PH#: 803-469-2800 Fac. Cont. Email:No Fac Cont. email on record ERD-0085 / 08/31/2009

Sumter / Corporation 615 W WESMARK BLVD SUMTER, SC 29150-1900

BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

Licensed Stations: Hemodialysis: 53 Peritoneal: 1

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed:

Number Licensed Units

54

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
5 ACES CUSTOM TATTOO	TF-0043 / 07/31/2009	6
393 RAST ST	Sumter / Sole Proprietorship	
SUMTER, SC 29150	2009 GREENE ST #106	
TURNER, MICHAEL PH#: 803-774-2237	COLUMBIA, SC 29205	
Fac. Cont. Email:LENACRAFT_DA@YAHOO.COM	WILLENA NICOLE HUDGINS	
GRAFFITI INK	TF-0010 / 07/30/2009	1
178A BULTMAN DR	Sumter / Sole Proprietorship	
SUMTER, SC 29150	178A BULTMAN DR	
MACHEN, MELINA PH#: 803-236-4657	SUMTER, SC 29150	
Fac. Cont. Email: MELINAMACHEN@HOTMAIL.COM	MELINA MACHEN	
INK SPOT TATTOOS	TF-0065 / 04/30/2009	4
1084-E BROAD ST	Sumter / Ltd. Liability	
SUMTER, SC 29150	1084-E BROAD ST	
BROWN, JEFFREY M PH#: 843-241-5408	SUMTER, SC 29150	
Fac. Cont. Email:No Fac Cont. email on record	INK SPOT TATTOOS LLC	
SOUTHERN INK OF SUMTER	TF-0042 / 07/31/2009	3
322 PINEWOOD RD	Sumter / Sole Proprietorship	
SUMTER, SC 29150	3180 FIRESTONE RD	
ORTIZ-VELEZ, JOHN A PH#: 803-840-3392	SUMTER, SC 29154	
Fac. Cont. Email: JOHNNYOV@AOL.COM	JOHN A ORTIZ-VELEZ	

Totals For Facility/License Type Tattoo Facility	
Number of Activities/Facilities licensed: 4 Number Lice	ensed Units 14
Number of Activities/Facilities licensed in county of Sumter	# Lics 43

Report Total

Total Number of Activities/Facilities licensed 43 Total Number Licensed Units 1,499

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Number Licensed Units: 1,499